

**United States Bankruptcy Court  
Eastern District of Pennsylvania**

In re Phyllis Cordero

Debtor(s)

Case No. 12-13181

Chapter 13

**DOMESTIC SUPPORT OBLIGATION DISCLOSURE FORM**

**Section 1: to be completed by all debtors:**

Date: October 5, 2016

Case No. 12-13181

Debtor: Phyllis Cordero

Co-Debtor: \_\_\_\_\_

SS No. xxx-xx-8814

SS No. \_\_\_\_\_

Are you responsible for any Domestic Support Obligations described in 11 U.S.C. §101(14A) [debt owed to or recoverable by spouse, former spouse, child, child's guardian or governmental unit in the nature of alimony, maintenance or support?]

Debtor: yes \_\_\_\_\_ no X

Co-Debtor: yes \_\_\_\_\_ no \_\_\_\_\_

If your answer is "No" skip to Section 3 at the bottom of this form and sign. If your answer is "Yes", please complete Section 2 and sign at the bottom.

**Section 2: to be completed only if you answered "yes" above:**

Debtor's current marital status:

Married \_\_\_\_\_ Divorced \_\_\_\_\_

Separated \_\_\_\_\_ Widowed \_\_\_\_\_

Co-debtor's current marital status:

Married \_\_\_\_\_ Divorced \_\_\_\_\_

Separated \_\_\_\_\_ Widowed \_\_\_\_\_

Name of person support is sent to: \_\_\_\_\_

Complete Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Are support payments deducted from your paycheck? \_\_\_\_\_

Provide the State Agency Information:

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Names of creditors for any debts that will not be discharged or that you will reaffirm:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Identify your Employer Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 3: To be signed by all debtors**

I swear or affirm under penalty of perjury pursuant to 28 USC § 1746 that the information provided herein is true, correct and complete.

Debtor /s/ Phyllis Cordero  
Phyllis Cordero

Co-Debtor \_\_\_\_\_